Under the P	aperwork Reduction Act of 1995, no persons are required to re		and Trademark Office, U.S	S. DEPARTME	
	UTILITY	Attorney Docke	et No. IXIM-0	1001US3	
Р	ATENT APPLICATION	First Inventor	Amit Ha	aller	
	TRANSMITTAL	A Device, System, Method a Readable Medium For Attac			
(Only for n	ew nonprovisional applications under 37 CFR 1.53(b))	Express Mail La	abel No. EV 30	05480409	US
See MPEP c	APPLICATION ELEMENTS hapter 600 concerning utility patent application contents.	ADDRESS	A	0)
2. Application See 37 3. Specification (preferred - Description - Cross - Statem - Refered or a control - Backgrown - Brief Statem - Brief St	ansmittal Form (e.g., PTO/SB/17) an original and a duplicate for fee processing) ant claims small entity status. CFR 1.27. cation [Total Pages 40] interpretation and arrangement set forth below) intive title of the invention Reference to Related Applications ment Regarding Fed sponsored R & D ence to sequence listing, a table, computer program listing appendix fround of the Invention Summary of the Invention Description of the Drawings (if filed)	Comp 8. Nucleotide (if applicab a	OM or CD-R in duplicate outer Program (Appendice and/or Amino Acid Secole, all necessary) Computer Readable For Specification Sequence CD-ROM or CD-F Paper Statements verifying id	(x) quence Subrom (CRF) e Listing on: R (2 copies);	mission or
- Detaile - Claim	ed Description (s)		OMPANYING APP		····
4. Drawin 5. Oath or Decl a. Nev b. Cop for i. Appli	by from a prior application (37 CFR 1.63(d)) continuation/divisional with Box 18 completed) DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). ication Data Sheet. See 37 CFR 1.76	10.		Pent (if application) MPEP 503) mized) ocument(s) do attach form	ower of ttorney able) opies of IDS citations C. 122 PTO/SB/35
specification fol	unknown		information below and it of prior application N Art Unit: 2661		
For CONTINUAT 5b, is considered	ION OF DIVISIONAL APPS only; The entire disclosure of the apart of the disclosure of the accompanying continuation can only be relied upon when a portion has been inadver	n or divisional application	i, from which an oath or d lication and is hereby inc in the submitted applicati	orporated by	
	19. CORRESPON	DENCE ADDR	ESS		
Customer Number: 28554 OR Correspondence address below					
Name	Kirk J. DeNiro, Esq.	0 D M	110		
Address	Vierra Magen Marcus Harm 685 Market Street, Suite 54		, LLP		
City	San Francisco	State Ca	llifornia	Zip Code	94105-4206
Country	II C A	elephone 1/14	15) 260 0660	Fax	(44E) 260 066

Kirk J. DeNiro This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandría, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

(415) 369-9660

Registration No. (Attorney/Agent)

(415) 369-9665

Sep. 18, 2003

35,854

Date

U.S.A.

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Signature

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PTO/SB/17 (08-03)
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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

SUBMITTED BY

Name (Print/Type)

Signature

Kirk J. DeNiro

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Complete if Known				
Application Number	Unknown			
Filing Date	September 18, 2003			
First Named Inventor	Amit Haller			
Examiner Name	Unknown			
Art Unit	Unknown			
Attorney Docket No.	IXIM-01001US3			

(Complete (if applicable))

Date

Telephone (415) 369-9660

September 18, 2003

Check	METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Deposit Account:	Check Credit card Money Other None	3. ADDITIONAL FEES			
Sol		Large Entity	Small Entity		
Number Deposit Account Name The Director is authorized to: (check all that apply) 1053 130 10	Deposit		Lee nest	cription <u>Fee Paid</u>	
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1. BASIC FILING FEE 1.		1805 1,840*		ion of SIR after	
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35,854

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